DMAS-DADS LTSS Screening Program Staff



Ramona Schaeffer Supervisor



Ivy Young
Communications



Dena Schall
Technical Assistance for NF LTSS Screeners
And ePAS



Roberta Mathews
Technical Assistance for Hospitals and
Community Based Screeners



Myra Isaacs
Technical Assistance for Preadmission
Screening for MI, ID and RC







SCREENING CONNECTIONS FOR LTSS SCREENERS

January 8, 2021

Presented by the Division for Aging and Disability Services

Logistics

- Post your questions for today's session in the Q&A box
- Detailed questions about an individual case can be sent to: <u>ScreeningAssistance@dmas.virginia.gov</u>

Send us your ideas for a future topic Any questions you want answered on the call should be sent at least by Friday, the week before the call.





Logistics

PowerPoints from the Screening Connection Call are posted on the DMAS Website Under Long Term Care: URL

http://www.dmas.virginia.gov/#/longtermprograms

At the top of the page choose the tab for

SCREENING FOR LTSS

look down the page for Screening Connection call information



Today's Conversation



 Highlighted Questions and Issues from Screening Assistance

 Questions and Answers from Call Participants

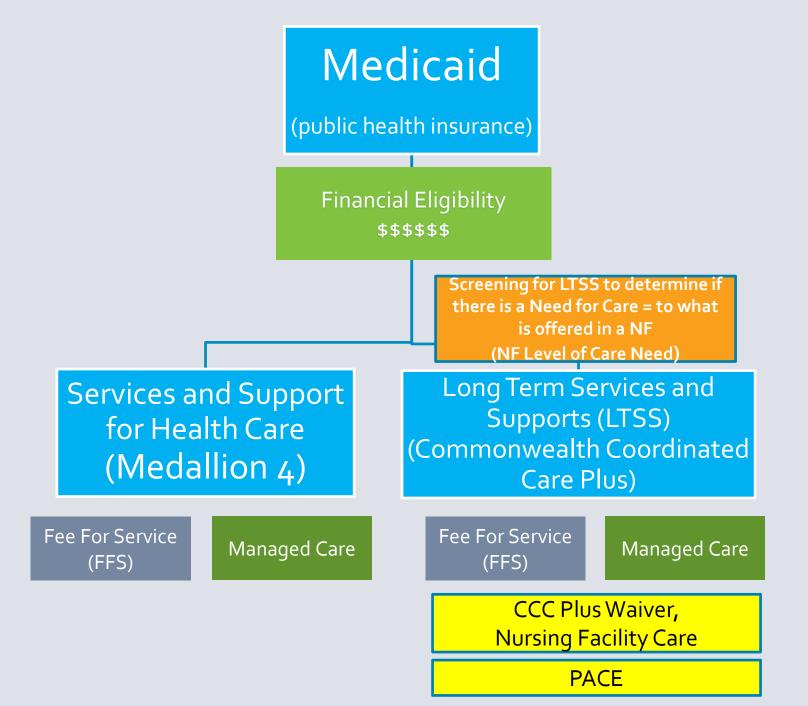




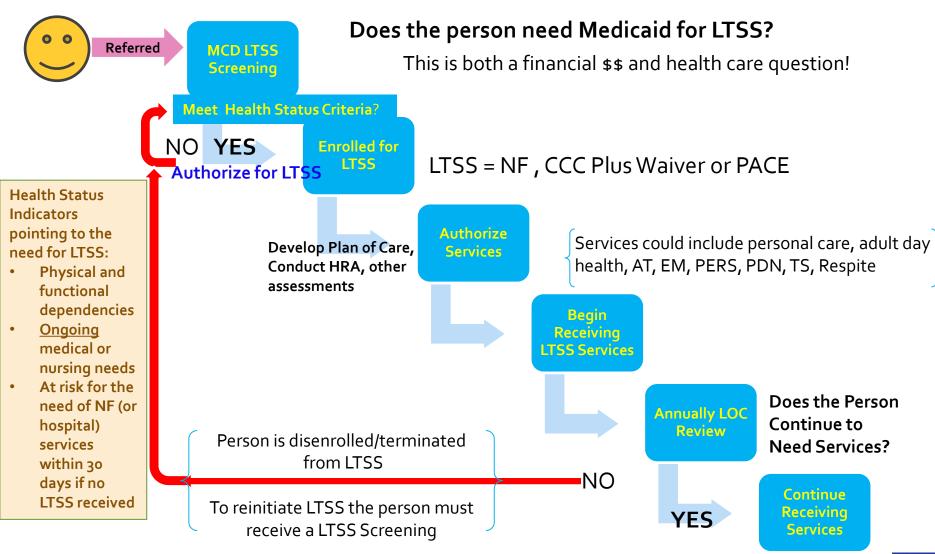
Updates: List of Topic Questions

- When is a Medicaid LTSS Screening Required?
- What's the difference between authorization and enrollment?
- Why don't we call the Medicaid LTSS Screening PAS or UAI?
- What change occurred for in the Code of Virginia related to Medicaid LTSS Screening?
- Who do you contact for MCD LTSS Screening training issues?
- □ Are COVID-19 flexibilities still in place?
- Who can change a MCD LTSS Screening or request a change?
- When is the next Screening Connection call?





When is a Medicaid LTSS Screening Needed?



Authorizing LTSS, Enrollment for LTSS and Authorizing LTSS Services all happen in quick succession!



The Initial Medicaid LTSS Screening And

The Medicaid Annual Review Process

(with CCC Plus waiver, PACE and MDS with Physician's Certification in NF)

ARE COMPANION PROCESSES

An individual 'gets into' Medicaid LTSS by the Medicaid LTSS Screening. Once <u>enrolled</u> in LTSS the individual is allowed to <u>stay in</u> the Medicaid LTSS by having an annual level of care review.



Authorization for a Program, Enrollment, Services Authorization

Medicaid LTSS



Going to College

- Medicaid LTSS Screening determines and may Authorize the 'level of care needed' meets criteria set of nursing facility care
 - Decide what type of setting (Community or NF)
- Enrollment: DMAS Medicaid
- Services authorization
- Annual review of care needs enables individual to remain in Medicaid LTSS (CCC Plus waiver, PACE or NF)

- SAT Confirms the aptitude to go to college
 - Review college options

- Applying and acceptance at a college
- Class registration
- Tests, grades, GPA that enables student to stay in college



When is a NEW LTSS Screening Needed?

- Initial need for Medicaid LTSS.
- When someone disenrolls (terminated) from Medicaid LTSS either because the person does not meet Level of Care criteria or financial eligibility and that person wants to re-establish Medicaid LTSS.
- Level of Care for LTSS has been end dated and there is no continuation of another type of LTSS

Should someone "hold onto the LTSS Screening" and use it two, three, 10 years later?

NO!

- Current Best Practice and Recommendation
 - Individuals should be enrolled in Medicaid LTSS within one year of the date of screening if they are approved for 'Level of Care' or' Exception Indicators' "1", "9" "A" or "PP"
 - Level of Care needs to be evaluated annually
 - Health status may change

If someone can live independently without LTSS for a year, how can this person be at risk for institutionalization within 30 days?



The Need for Nursing Facility Level of Care Should be Checked Annually

A person who receives a LTSS Screening should enroll within a year of the screening.



The original intent for the LTSS screening is that it is used for immediate (or near immediate enrollment for services); however, due to issues of financial spend down, time spent identifying providers, etc. DMAS is allowing that the screening be "good" for a year.

The LTSS options - NF, CCC Plus waiver, PACE ALL require an annual review confirming the level of care.

If an individual's enrollment screening is older than 1 year DMAS highly recommends the best practice procedure that a NEW screening is conducted before a person is **enrolled** for services.



LTSS Screening NOT PAS or UAI

Why not? And, Who Cares?



- Eliminate Confusion and Delays
 - PAS [preadmission screening is also a term used to describe screening individuals for mental illness (MI), intellectual disability (ID) and related conditions (RC)]
 - UAI (Uniform Assessment Instrument) statewide tool used by ALFs, mental health, DMAS for LTSS Screening ... however, each program has it's own eligibility criteria



New Legislation Review

Code of Virginia § 32.1-330



- The SNF LTSS Screening Team can only screen private pay individuals in SKILLED NF converting to Medicaid and who need LTSS who were admitted directly from a hospital.
- The Hospitals and Community Based Teams will continue to conduct LTSS Screenings.
- Hospitals will conduct Screenings for anyone who is inpatient, has Medicaid, and those who directly request a LTSS Screening (will no longer be mandated to conduct them on persons likely to become Medicaid eligible within 6 months).
- Hospitals will conduct Screenings on Dual eligible individualspersons having Medicaid and Medicare.



New Legislation Review

Practices that are <u>not changing</u>:

- Those already enrolled in LTSS (Long Term Care/Custodial Care) as private pay who become Medicaid eligible, will utilize the MDS/Physician certification to document the NF Level of Care.
- Those individuals that are in the LTSS NF who want to discharge from the facility home with the CCC Plus Waiver or PACE AND do not have a Screening will be Screened by the local Community Based Team (VDH/DSS). The NF discharge planning team will need to contact the local CBT (DSS or VDH) to schedule a LTSS screening before the individual is discharged back into the community.



LTSS Screening Responsibilities

SCREENING RESPONSIBILITIES

Funding Source	Is a LTSS Screening Required?	When is the LTSS screening is completed?	Who completes the Medicaid LTSS Screening?
Private Pay*	NO	Not Applicable (NA)	NA
Medicare Only*	NO	NA	NA
Dual Medicare & Medicaid	YES	Prior to admission to SNF or ICF (LTSS)	Hospital (if inpatient) Community-based Team (community resident)
Medicaid only	YES	Prior to admission to SNF or ICF (LTSS)	Hospital (if inpatient) Community-based Team (community resident)
Private Pay or Medicare applying for Medicaid while in SNF	YES	Change of Level of Care from SNF to LTSS	Nursing Facility
REQUESTS: Any time a person requests a LTSS Screening one shall be conducted, regardless of Payment Source	YES	When requested	Community-based Team, Hospital or Nursing Facility

- *Community-Based Teams are continuing to conduct ALL screenings as requested and referred.
- ** ALL individuals, regardless of payment source, who are being considered for admission to a Medicaid-certified NF (SNF or LTSS NF) SHALL be screened for mental illness, intellectual disability or related conditions, PRIOR to NF admission. Everyone shall follow the PASRR process procedures.

Medicaid LTSS Screening Training

Hosted on VCU Partnership for People with Disabilities website

www.medicaidltss.partnership.vcu.edu



 Screeners as well as guests are asked to register in order to access the Medicaid LTSS Screening Training. If you have problems with registration, logging in, technical things like name being wrong, assigned to wrong organization. Please contact:

ppdtechhelp@vcu.edu

 All Medicaid LTSS CONTENT or POLICY Questions come to <u>ScreeningAssistance@dmas.Virginia.gov</u>



Update: COVID-19 Flexibilities

Continuing until January 20, 2021: Content listed in the Medicaid Memo dated May 26, 2020

NFs and Hospitals

 Individuals MAY be admitted to a NF without the Medicaid LTSS Screening directly after discharge from a hospital.



 NF MAY admit individuals without the PASRR Level I Screening and, if needed, Level II Evaluation and Determination.

If an individual remains in the NF at least 30 days, the PASRR process MUST be conducted by the NF.

CBTs

 May continue to screen using telehealth methods but the individual must be involved.



Extension Memo Date: October 22, 2020



Who can update a LTSS Screening?

- LTSS Screenings are legal medical documents signed (electronic attestation to the signature) by LTSS Screeners and physician (including Virginia Licensed NPs and PAs)
- Only the originating LTSS Screener can request to change a LTSS Screening once it has been Successfully Processed
- Screening Assistance cannot change a LTSS Screening





Update

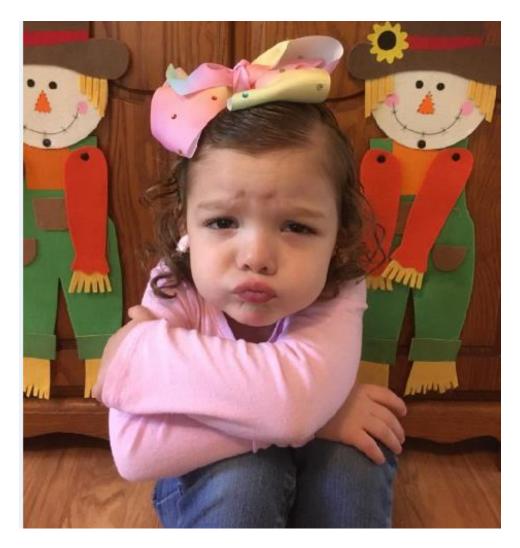
CHECK CHECK CHECK

- It is ESSENTIAL you triple check your work on a LTSS Screening PRIOR to hitting the submit button!!!
 - ESPECIALLY:

Names, SSN, Medicaid ID, or other demographics Do NOT expect DMAS LTSS Screening staff to be able to void/fix something on short notice!



When you do not check your work it leads to this!





LTSS Screening Connector

NEXT CALL



February 9, 2021





DMAS-DADS LTSS Screening Program Staff



Ramona Schaeffer Supervisor



Ivy Young
Communications



Dena Schall
Technical Assistance for NF LTSS Screeners
And ePAS



Roberta Mathews
Technical Assistance for Hospitals and
Community Based Screeners and Clinical Issues



Myra Isaacs
Technical Assistance for Preadmission
Screening for MI, ID and RC



To all the healthcare workers on the front lines of the coronavirus pandemic:













THANK YOU!



Question and Answers

Do you have a question?





Who to Contact Regarding Medicaid LTSS Screening Issues?

